Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Michael First name T Middle name Capalbo Last name and Suffix (Sr., Jr., II, III)	Barbara First name Middle name Capalbo Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or		
	maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8848	xxx-xx-6995

	otor 1 Michael T Capalbotor 2 Barbara Capalbo	o	Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	23 Lorraine Loop	If Debtor 2 lives at a different address:
		Staten Island, NY 10309	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Richmond	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

	otor 1 otor 2	Michael T Capalbo Barbara Capalbo	•				Case number	(if known)	
Par	t 2:	Tell the Court About	our Bank	ruptcy Ca	ise				
7.	Bank	chapter of the cruptcy Code you are			orief description of each			12(b) for Individuals Filin	g for Bankruptcy
	cnoo	sing to file under	■ Chap	ter 7					
			☐ Chap	ter 11					
			☐ Chap	ter 12					
			☐ Chap	ter 13					
8.	How	you will pay the fee	abo	out how yo	ou may pay. Typically, if attorney is submitting y	you are paying the fe	e yourself, you ma	k's office in your local co ay pay with cash, cashie ey may pay with a credi	r's check, or money
					y the fee in installment ee in Installments (Officia		option, sign and at	tach the Application for	Individuals to Pay
			☐ I re	equest that is not requalities to you	at my fee be waived (Youred to, waive your fee our family size and you a	ou may request this on and may do so only be unable to pay the fe	if your income is le ee in installments)	re filing for Chapter 7. By ess than 150% of the off . If you choose this optic	icial poverty line that on, you must fill out
			the	Application	on to Have the Chapter	7 Filing Fee Waived (Official Form 103E	B) and file it with your pe	tition.
9.		you filed for ruptcy within the	■ No.						
		years?	☐ Yes.						
				District		When		Case number	
				District		When		Case number	
				District		When		Case number	
10.	Are a	iny bankruptcy	■ No						
	case filed not f	s pending or being by a spouse who is iling this case with	■ No □ Yes.						
		or by a business ner, or by an nte?							
				Debtor			F	Relationship to you	
				District		When	(Case number, if known	
				Debtor				Relationship to you	
				District		When	(Case number, if known	
11.		ou rent your	■ No.	Go to I	ine 12.				
	resid	ence?	☐ Yes.	Has yo	our landlord obtained an	eviction judgment ag	ainst you?		
			00.		No. Go to line 12.	, 5	•		
							tion Judgment Aga	inst You (Form 101A) a	nd file it as part of

_		Michael T Capalbo Barbara Capalbo	•		Case number (if known)
Par	t 3:	Report About Any Bu	sinesses	You Own as a Sole Propri	etor
12.		ou a sole proprietor r full- or part-time ess?	■ No.	Go to Part 4.	
			☐ Yes.	Name and location of bu	usiness
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation,		ess you operate as ividual, and is not a ate legal entity such		Name of business, if an	у
	If you sole p separa	have more than one roprietorship, use a ate sheet and attach		Number, Street, City, St	
	it to th	is petition.		• • •	oox to describe your business:
				_	siness (as defined in 11 U.S.C. § 101(27A))
				_	al Estate (as defined in 11 U.S.C. § 101(51B))
					defined in 11 U.S.C. § 101(53A))
					xer (as defined in 11 U.S.C. § 101(6))
				☐ None of the abo	ve
13.	Chapt Bankr	ou filing under ter 11 of the ruptcy Code and are small business r?	deadlines operation	s. If you indicate that you are	e court must know whether you are a small business debtor so that it can set appropriate e a small business debtor, you must attach your most recent balance sheet, statement of I federal income tax return or if any of these documents do not exist, follow the procedure
	For a	definition of <i>small</i>	■ No.	I am not filing under Cha	apter 11.
	busine	ess debtor, see 11 . § 101(51D).	□ No.	I am filing under Chapte Code.	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
			☐ Yes.	I am filing under Chapte	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4:	Report if You Own or	Have Any	Hazardous Property or A	ny Property That Needs Immediate Attention
14.		u own or have any	■ No.		
		erty that poses or is ed to pose a threat	☐ Yes.		
	of imr	ninent and	— 100.	What is the hazard?	
		fiable hazard to health or safety?			
		you own any		If immediate attention is	
		diate attention?		needed, why is it needed?	
	perish livesto or a b	cample, do you own able goods, or ock that must be fed, uilding that needs t repairs?		Where is the property?	
					Number, Street, City, State & Zip Code

	btor 2 Barbara Capalbo					Cas	e number (if known)
art	Explain Your Efforts	to Re	ceive	a Briefing About Credit Counseling			
_				btor 1:			ebtor 2 (Spouse Only in a Joint Case):
15.	Tell the court whether you have received a briefing about credit counseling.	You	I rece coun filed	check one: eived a briefing from an approved credit useling agency within the 180 days before I this bankruptcy petition, and I received a ficate of completion.	You	I rec cou this	t check one: ceived a briefing from an approved credit nseling agency within the 180 days before I filed bankruptcy petition, and I received a certificate of npletion.
	The law requires that you receive a briefing about credit counseling before you file for bankruptcy.			h a copy of the certificate and the payment if any, that you developed with the agency.			ch a copy of the certificate and the payment plan, if that you developed with the agency.
Yoo on che so, file If y car will yoo cre	You must truthfully check one of the following choices. If you cannot do so, you are not eligible to		coun filed	eived a briefing from an approved credit iseling agency within the 180 days before I this bankruptcy petition, but I do not have tificate of completion.		cou this	ceived a briefing from an approved credit nseling agency within the 180 days before I filed bankruptcy petition, but I do not have a certificate ompletion.
	file. If you file anyway, the court can dismiss your case, you		petitio	n 14 days after you file this bankruptcy on, you MUST file a copy of the certificate and nent plan, if any.			nin 14 days after you file this bankruptcy petition, you ST file a copy of the certificate and payment plan, if
	will lose whatever filing fee you paid, and your creditors can begin collection activities again.		servi unab days circu	tify that I asked for credit counseling ices from an approved agency, but was ile to obtain those services during the 7 after I made my request, and exigent imstances merit a 30-day temporary waiver e requirement.		fror thos requ	rtify that I asked for credit counseling services n an approved agency, but was unable to obtain se services during the 7 days after I made my uest, and exigent circumstances merit a 30-day porary waiver of the requirement.
			To as requi what you very bank	sk for a 30-day temporary waiver of the rement, attach a separate sheet explaining efforts you made to obtain the briefing, why vere unable to obtain it before you filed for ruptcy, and what exigent circumstances red you to file this case.		to o befo circo	ask for a 30-day temporary waiver of the requirement, ch a separate sheet explaining what efforts you made btain the briefing, why you were unable to obtain it ore you filed for bankruptcy, and what exigent umstances required you to file this case. It case may be dismissed if the court is dissatisfied
			Your dissa briefil If the still re Your agen devel	case may be dismissed if the court is tisfied with your reasons for not receiving a ng before you filed for bankruptcy. court is satisfied with your reasons, you must eceive a briefing within 30 days after you file. must file a certificate from the approved cy, along with a copy of the payment plan you loped, if any. If you do not do so, your case be dismissed.		If the rece file a copy not	your reasons for not receiving a briefing before you I for bankruptcy. e court is satisfied with your reasons, you must still give a briefing within 30 days after you file. You must a certificate from the approved agency, along with a y of the payment plan you developed, if any. If you do do so, your case may be dismissed. extension of the 30-day deadline is granted only for se and is limited to a maximum of 15 days.
		_	Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about				n not required to receive a briefing about credit
				it counseling because of:	Ь.		nseling because of:
				Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.			Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
				Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after reasonably tried to do so.			Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
				Active duty. I am currently on active military duty in a military combat zone.			Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a

motion for waiver credit counseling with the court.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	tor 1 Michael T Capalbo tor 2 Barbara Capalbo	o			Case nur	nber (if known)		
Part	t 6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consun individual primarily for a personal,			defined in 11 U.S.C. § 101(8) as "incurred by a	เท	
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe that	at are not consum	ner debts or busi	iness debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you are paid that funds will be available			property is excluded and administrative expensors?	es	
	administrative expenses are paid that funds will		No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	□ 1-49		1 ,000-5,000		2 5,001-50,000		
	you estimate that you owe?	50-99		☐ 5001-10,000 ☐ 40,004,05,00		50,001-100,000	☐ 50,001-100,000 ☐ More than100,000	
		☐ 100-1 ☐ 200-9		10,001-25,00	JO	☐ More than 100,000		
19.	How much do you estimate your assets to	□ \$0 - \$50,000		\$1,000,001 - \$10 million		□ \$500,000,001 - \$1 billion		
	be worth?		01 - \$100,000 ,001 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			001 - \$1 million	\$100,000,00		☐ More than \$50 billion		
20.	How much do you estimate your liabilities	□ \$0 - \$		□ \$1,000,001 -		\$500,000,001 - \$1 billion		
	to be?		001 - \$100,000 ,001 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
			001 - \$1 million	□ \$100,000,00°	,001 - \$500 million			
Part	7: Sign Below							
For	you	I have ex	camined this petition, and I declare u	ınder penalty of p	erjury that the in	formation provided is true and correct.		
						ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.		
			rney represents me and I did not part, I have obtained and read the notice			s not an attorney to help me fill out this .		
		I request	relief in accordance with the chapte	er of title 11, Unite	d States Code, s	specified in this petition.		
			tcy case can result in fines up to \$25			ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 151	9,	
		/s/ Mich	nael T Capalbo		/s/ Barbara C		-	
			I T Capalbo e of Debtor 1		Barbara Capa Signature of De			
		Executed	d on January 8, 2020 MM / DD / YYYY			January 8, 2020 MM / DD / YYYY		

Debtor 1 Michael T Capalb Debtor 2 Barbara Capalbo	Case number (if known)							
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Un	ited States Code, and have ex	nformed the debtor(s) about eligibility to proceed xplained the relief available under each chapter ebtor(s) the notice required by 11 U.S.C. § 342(b)					
If you are not represented by an attorney, you do not need to file this page.			edge after an inquiry that the information in the					
. •	/s/ Paul Hollender	Date	January 8, 2020					
	Signature of Attorney for Debtor		MM / DD / YYYY					
	Paul Hollender Printed name							
	Corash & Hollender							
	Firm name							
	1200 South Avenue							
	Suite 201							
	Staten Island, NY 10314							
	Number, Street, City, State & ZIP Code							
	Contact phone 718-442-4424	Email address	info@silawfirm.com					
	PH5834 NY							
	Bar number & State							

Fill	in this inform	ation to identify your	casa.			
Deb		Michael T Capalb				
Den	101 1	First Name	Middle Name	Last Name		
1 -	tor 2 use if, filing)	Barbara Capalbo	Middle Name	Last Name		
` '		kruptcy Court for the:	EASTERN DISTRICT O			
		mapley Court for the				
(if kno	e number				_	k if this is an ded filing
						J
Off	icial For	m 106Sum				
			and Liabilities a	nd Certain Statistical Information		12/15
infor	mation. Fill o	ut all of your schedule	es first; then complete t	e are filing together, both are equally responsible the information on this form. If you are filing amends the box at the top of this page.		
Part	1: Summa	rize Your Assets				
					Your a	ssets of what you own
1.		B: Property (Official Fo			\$	429,901.00
					· —	
	1b. Copy line	62, Total personal prop	perty, from Schedule A/B.		\$	29,269.58
	1c. Copy line	63, Total of all property	on Schedule A/B		\$	459,170.58
Part	2: Summa	rize Your Liabilities				
						abilities t you owe
2.			aims Secured by Propert nn A, Amount of claim, at	y (Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	\$	210,034.41
3.			Unsecured Claims (Official	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	9,067.26
	3b. Copy the	total claims from Part 2	2 (nonpriority unsecured of	claims) from line 6j of Schedule E/F	\$	106,014.53
				Your total liabilities	s s	325,116.20
Part	3: Summa	rize Your Income and	Expenses			
4.		our Income (Official Foombined monthly income		e /	\$	4,781.77
5.		Your Expenses (Official onthly expenses from line of the contract of the contr	,		\$	4,704.66
Part	4: Answer	These Questions for	Administrative and Stat	tistical Records		
6.		•	er Chapters 7, 11, or 13? on this part of the form. C	? Check this box and submit this form to the court with yo	our other sc	hedules.
7.	■ Yes What kind of	f debt do you have?				
				debts are those "incurred by an individual primarily for 9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
		ebts are not primarily of the with your other schedu		ave nothing to report on this part of the form. Check the	s box and s	ubmit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor 2		
	om the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 2A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$ 3,281.77

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	I claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	9,067.26
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	9,067.26

			your case and t	his filin	g:			
Debt		Michael T C First Name		le Name	Last Name			
Debt	· .	Barbara Ca		le Name	Last Name			
` .	3,				ICT OF NEW YORK			
		aptoy Court to	Tulo. Enotetti	I DIOTIC	101 OF NEW FORK			
Case	number							Check if this is an amended filing
								· ·
Off	icial Form	n 106A/E	3					
Sc	hedule	A/B: P	roperty					12/15
think i inforn	it fits best. Be as nation. If more sp er every question	complete and ace is needed,	accurate as possib attach a separate s	le. If two sheet to t	t only once. If an asset fits in more than on married people are filing together, both are this form. On the top of any additional page	e equally responsi	ble for supply	ying correct
1. Do	you own or have	any legal or e	quitable interest in	any resid	dence, building, land, or similar property?			
	No. Go to Part 2.			•				
_	Yes. Where is the	property?						
1.1				Wha	t is the property? Check all that apply			
-	23 Lorraine L	<u> </u>			Single-family home			or exemptions. Put
	Street address, if ava	ailable, or other de	scription					aims on <i>Schedule D:</i> Secured by Property.
					Condominium or cooperative			
	Staten Island	I NY	10309-0000			Current value		urrent value of the
-	City	State	ZIP Code	. 🗀	Land Investment property	entire property \$429,9	=	ortion you own? \$429,901.00
								ownership interest
				_	has an interest in the property? Check one	(such as fee si a life estate), if		y by the entireties, or
	Diahaa aa			_	Debtor 1 only	Tenancy by	the Entire	ety
-	Richmond County							
	County					☐ Check if the (see instruction	nis is commu	nity property
					er information you wish to add about this ite	em, such as local		
				prop	erty identification number:			
2. <i>I</i>	Add the dollar v	alue of the p	ortion you own fo	or all of	your entries from Part 1, including any	y entries for		* 400 004 00
F	ages you have	attached for	Part 1. Write that	t numbe	er here	=>		\$429,901.00
Part :	2: Describe You	r Vehicles						
				rest in s	any vehicles, whether they are register	ed or not? Inclu	de any vehic	les you own that
					Schedule G: Executory Contracts and Un		ac any venio	nes you own that
some	one else drives.	If you lease a		ort it on	Schedule G: Executory Contracts and Un		de arry verne	ico you own that
some	one else drives.	If you lease a	vehicle, also repo	ort it on	Schedule G: Executory Contracts and Un		de any verne	ios you own that

Official Form 106A/B Schedule A/B: Property page 1

	ebtor 1 ebtor 2	Michael T Ca Barbara Cap		nown)
		, ,	or homes, ATVs and other recreational vehicles, other vehicles, and accessories motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
	□ Yes			
5			the portion you own for all of your entries from Part 2, including any entries for ed for Part 2. Write that number here=	\$0.00
P	art 3: Des	scribe Your Perso	nal and Household Items	
	·	·	egal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Example ☐ No	old goods and fes: Major applian Describe	urnishings ces, furniture, linens, china, kitchenware	
			Household goods and furnishings	\$2,500.00
7.	□ No	es: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; months phones, cameras, media players, games	usic collections; electronic devices
			General household electronics	\$1,200.00
8.	Example No		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, ons, memorabilia, collectibles	coin, or baseball card collections;
9.	Equipme Example	ent for sports ar	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; car	noes and kayaks; carpentry tools;
	■ No □ Yes.	Describe		
10	■ No		s, shotguns, ammunition, and related equipment	
11	□ No Î		othes, furs, leather coats, designer wear, shoes, accessories	
	— 165.	DE30110E		
			Clothing	\$700.00
12	. Jewelr y <i>Examp</i>		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, ge	ems, gold, silver

Yes. Describe.....

Debtor 1 Debtor 2	Michael T Capa Barbara Capall					Case number (if known)	
	A	Ssor	ted Jewelry				\$2,700.00
Exam ■ No	arm animals ples: Dogs, cats, bird	ds, hor	ses				
14. Any o t ■ No	ther personal and h	ousel	nold items you did not	already list,	including any health	aids you did not list	
☐ Yes.	Give specific inform	nation.					
			vour entries from Part nere			s you have attached	\$7,100.00
Part 4: De	escribe Your Financial	l Asset	s				
Do you o	wn or have any lega	al or e	quitable interest in an	y of the follo	wing?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No		-	our wallet, in your home			d when you file your petitic	on
						Cash	\$40.00
Exam _i □ No	institutions. If y		ve multiple accounts wit	h the same in	stitution, list each.	credit unions, brokerage h	ouses, and other similar
		17.2.	Checking Account	Northfie	ld Bank		\$550.00
<i>Exam</i> ■ No	s, mutual funds, or ples: Bond funds, inv		ly traded stocks ent accounts with broken Institution or issuer nan		oney market accounts		
joint v	ublicly traded stocl venture	k and	interests in incorpora	ed and unin	corporated business	es, including an interest	in an LLC, partnership, and
■ No □ Yes.	Give specific inform		about them ne of entity:			% of ownership:	
Negot	<i>tiable instruments</i> inc	clude p	nds and other negotial personal checks, cashie those you cannot transf	rs' checks, pr	omissory notes, and m	noney orders.	
	Give specific inform		about them uer name:				

Official Form 106A/B Schedule A/B: Property page 3

Case 1-20-40463-cec Doc 1 Filed 01/24/20 Entered 01/24/20 11:10:47 Michael T Capalbo Case number (if known) **Barbara Capalbo** 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Yes. List each account separately. Type of account: Institution name: **IRA First Symetra National Life Insurance** \$21,459,58 Company of NY 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

28. Tax refunds owed to you

■ No

Debtor 1

Debtor 2

□ No

No

No

■ No

■ No

■ No

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

☐ Yes. Give specific information..

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Official Form 106A/B Schedule A/B: Property page 4

Debtor 1 Debtor 2	Michael T Capalbo Barbara Capalbo	Case number (if known)	
20010. 2	Barbara Capaibo		
☐ Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
If you a some of	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance has died. Give specific information	ance policy, or are currently entitled to reco	eive property because
Examp ■ No —	against third parties, whether or not you have filed a lawsuit or oles: Accidents, employment disputes, insurance claims, or rights to some describe each claim		
■ No	contingent and unliquidated claims of every nature, including co	ounterclaims of the debtor and rights to	set off claims
35. Any fir	ancial assets you did not already list		
■ No			
	Give specific information		
	he dollar value of all of your entries from Part 4, including any eart 4. Write that number here	. • .	\$22,169.58
Part 5: De	scribe Any Business-Related Property You Own or Have an Interest In. L	ist any real estate in Part 1.	
37. Do you 6	own or have any legal or equitable interest in any business-related prope	rty?	
■ No. Go	to Part 6.		
☐ Yes. 0	Go to line 38.		
	scribe Any Farm- and Commercial Fishing-Related Property You Own or ou own or have an interest in farmland, list it in Part 1.	Have an Interest In.	
	own or have any legal or equitable interest in any farm- or com	mercial fishing-related property?	
■ No.	Go to Part 7.		
☐ Yes	. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did No	List Above	
_Exam _l	have other property of any kind you did not already list? bles: Season tickets, country club membership		
■ No □ Yes	Give specific information		
— 103.	Cito oposiilo iliioittiaalotti		
54. Add t	he dollar value of all of your entries from Part 7. Write that numl	per here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

Debt Debt			Case number (if known)	
Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$429,901.00
56.	Part 2: Total vehicles, line 5	\$0.00		_
57.	Part 3: Total personal and household items, line 15	\$7,100.00		
58.	Part 4: Total financial assets, line 36	\$22,169.58		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$29,269.58	Copy personal property total	\$29,269.58
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$459,170.58

Official Form 106A/B Schedule A/B: Property page 6

Fill	in this information to identify your case:				
Del	btor 1 Michael T Capalbo				
Dol	First Name	Middle Name	L	_ast Name	
		Middle Name	L	Last Name	
Uni	ited States Bankruptcy Court for the: EAS	TERN DISTRICT OF NI	EW Y	ORK	
Cas	se number				
	nown)				☐ Check if this is an
					amended filing
Of	ficial Form 106C				
Sc	chedule C: The Prope	rty You Cla	im	as Exempt	4/19
the properties	as complete and accurate as possible. If two reproperty you listed on <i>Schedule A/B: Property</i> ded, fill out and attach to this page as many cenumber (if known). each item of property you claim as exemp	y (Official Form 106A/B) copies of <i>Part 2: Addition</i>	as yo nal Pa	our source, list the property that you age as necessary. On the top of any	claim as exempt. If more space is additional pages, write your name and
spe any func exe	each item of property you claim as exempt cific dollar amount as exempt. Alternativel applicable statutory limit. Some exemptiods—may be unlimited in dollar amount. Homption to a particular dollar amount and the applicable statutory amount.	y, you may claim the f ns—such as those for wever, if you claim an	ull fa heal exer	ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu	ing exempted up to the amount of penefits, and tax-exempt retirement the under a law that limits the
Pai	rt 1: Identify the Property You Claim as	Exempt			
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.	
	■ You are claiming state and federal nonbal	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/E	3 that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on	Current value of the Amount of the exemption you claim		Specific laws that allow exemption	
	Schedule A/B that lists this property	portion you own Copy the value from Check only one box for each exemption.			
De	btor 1 Exemptions	Schedule A/B			
<u>DC</u>	23 Lorraine Loop Staten Island, NY	\$429,901.00		\$109,933.29	NYCPLR § 5206
	10309 Richmond County Line from Schedule A/B: 1.1			100% of fair market value, up to	
				any applicable statutory limit	
	Household goods and furnishings	\$2,500.00		\$1,250.00	NYCPLR § 5205(a)(5)
	Line from Schedule A/B: 6.1			100% of fair market value, up to	
				any applicable statutory limit	
	General household electronics	\$1,200.00		\$600.00	NYCPLR § 5205(a)(5)
	Line from Schedule A/B: 7.1	·		100% of fair market value, up to any applicable statutory limit	
	Clothing	\$700.00		\$300.00	NYCPLR § 5205(a)(5)
	Line from Schedule A/B: 11.1		_	100% of fair market value, up to any applicable statutory limit	
	Assorted Jewelry	\$2,700.00		\$700.00	NYCPLR § 5205(a)(6)

Official Form 106C

☐ 100% of fair market value, up to any applicable statutory limit

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Check only one box for each exemption.						
	IRA: First Symetra National Life Insurance Company of NY	\$21,459.58	\$21,459.58	NY Ins. Law § 3212					
	Line from Schedule A/B: 21.1	☐ 100% of fair market valu any applicable statutory							
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every			ent.)					
	No								
	Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?								
	□ No								
	☐ Yes								

T-FI	Il in this information to identify your case:					
De	Ebtor 1 First Name	Middle Name	L	ast Name		
	ebtor 2 Barbara Capalbo					
(Sp	oouse if, filing) First Name	Middle Name	L	ast Name		
Ur	nited States Bankruptcy Court for the: EAS	STERN DISTRICT OF NE	EW Y	ORK		
Ca	ase number					
	known)					Check if this is an
						amended filing
\bigcirc	fficial Form 106C					
		· ······ · · · · · · · · · · · · · · ·	•	F		
<u>></u>	chedule C: The Prope	erty You Cla	ıım	as Exempt		4/19
For special sp	as complete and accurate as possible. If two property you listed on Schedule A/B: Proper eded, fill out and attach to this page as many se number (if known). The each item of property you claim as exempled as exempted as a second as	pty (Official Form 106A/B) copies of Part 2: Addition pt, you must specify the ely, you may claim the fons—such as those for owever, if you claim an the value of the propert sexempt ag? Check one only, ever ankruptcy exemptions. 1 U.S.C. § 522(b)(2) By that you claim as exempted.	as your as you as you as you as you as you are a mull fair health exen a company is company is company is company is company is company as you are a multiple as you are a multi	our source, list the property that you age as necessary. On the top of any ount of the exemption you claim. Ir market value of the property be thaids, rights to receive certain Inption of 100% of fair market value determined to exceed that amount our spouse is filing with you. S.C. § 522(b)(3) fill in the information below.	One way or one way or one way or one way or one one of the control	empt. If more space is pages, write your name and doing so is to state a sed up to the amount of d tax-exempt retirement aw that limits the apption would be limited
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim eck only one box for each exemption.	Specific la	ws that allow exemption
		Schedule A/B	CHE	еск опіў опе вох тог еасті ехетіріют.		
De	ebtor 2 Exemptions					
	23 Lorraine Loop Staten Island, NY 10309 Richmond County	\$429,901.00		\$109,933.30	NYCPLE	R § 5206
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
	Household goods and furnishings Line from Schedule A/B: 6.1	\$2,500.00		\$1,250.00	NYCPLF	R § 5205(a)(5)
				100% of fair market value, up to any applicable statutory limit		
	General household electronics Line from Schedule A/B: 7.1	\$1,200.00		\$600.00	NYCPLE	R § 5205(a)(5)
				100% of fair market value, up to any applicable statutory limit		
	Clothing Line from Schedule A/B: 11.1	\$700.00		\$400.00	NYCPLE	R § 5205(a)(5)
				100% of fair market value, up to any applicable statutory limit		
	Assorted Jewelry	\$2 700 00		\$2,000,00	NYCPLE	R § 5205(a)(6)

Official Form 106C

\$2,700.00

\$2,000.00

100% of fair market value, up to any applicable statutory limit

Line from Schedule A/B: 12.1

		ription of the property and line on A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
 3. Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) No 					
	☐ Yes				

Official Form 106C

Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more spars needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. Wells Fargo Home	Fill in this infor	mation to identify you	ur case:			
Debtor 2 Barbara Capalibo First Name Middle Name Last Name	Debtor 1					
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK Case number (if known) Cifficial Form 106D Schedule D: Creditors Who Have Claims Secured by Property 1/2/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more spassible of for supplying correct information. If more spassible of spassible information below. Part 1: List All Secured Claims Yes. Fill in all of the information below. Part 1: List All Secured Claims List all secured claims. If a creditor has a particular claim, list the creditor separately for supplying correct information. If more spassible, list the claims is aphrabetical order according to the creditors in Part 2. As not deduct the value of collateral, but the supports this claim in supports the supports this claim in supports this claim in supports the support shis claim. It was possible, list the claims in aphrabetical order according to the creditor's name. 2.1 Wells Fargo Home Mortgage Describe the property that secures the claim: 2.2.1 Wells Fargo Home Mortgage Describe the property that secures the claim: 2.3 Lorraine Loop Staten Island, NY 10309 Richmond County P O Box 105632 Atlanta, GA 30348 Conditions All con						
United States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK Case number (if known) Difficial Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more spanse needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. PYes, Fill in all of the information below. Part 1: List All Secured Claims. Province and claims. If a creditor has more than one secured claim, list the creditor separately for each claims. If a creditor has more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditors in Part 2. As much as particular claim, list the creditor in Part 2. As much as particular claim, list the creditor in Part 2. As much as particular claim, list the creditor in Part 2. As much as particular claim, list the creditor in Part 2. As much as much as particular claim, lis						
Case number Check if this is an amended filling Column B	(Spouse II, IIIIIg)	First Name	Mildule Name Last Name			
Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more spansed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Yes. Fill in all of the information below. Part 2: List all secured claims. If a creditor has more than one secured claim, list the other creditor supparately to reach claim. If more than one creditor has a particular claim, list the other creditor's name. Yes. Fill one than one creditor has a particular claim, list the other creditor's name. Column A Amount of claim box not claim box not claim box not claim box not deduct the value of collateral that supports this claim. PO Box 105632 Atlanta, GA 30348 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 and Debtor 2 only As of the date you file, the claim is: Check all that apply. As a of the date you file, the claim is: Check all that apply. As a of the date you file, the claim is: Check all that apply. As a of the date you file, the claim is: Check all that apply. As a file that claim relates to a community debt Date debt was incurred 2010 Last 4 digits of account number 9143	United States Ba	nkruptcy Court for the	: EASTERN DISTRICT OF NEW YORK		-	
Difficial Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more spas needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes, Fill in all of the information below. Part 1: List All Secured Claims. Yes, Fill in all of the information below. Part 1: List All Secured Claims in a creditor has more than one secured claim, list the creditor's separately for each claim. If more than one creditor has a particular claim, list the other creditor's name. 2. List all secured claims in a creditor has more than one secured claim, list the creditor's name. Column A Mount of claim bo not deduct the board of collateral value of collateral board of collateral value of collateral board of collateral value of collateral board of collateral board of collateral value of collateral board of collateral value	Case number					
Difficial Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Se as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more spans needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Portable List All Secured Claims. List All Secured claims, if a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim and plabetical order according to the creditor's name. 2.1 Wells Fargo Home Mortgage Describe the property that secures the claim: 2.2 Lorraine Loop Staten Island, NY 10309 Richmond County As of the date you file, the claim is: Check all that apply. As of the date you made (such as mortgage or secured car loan) Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only As of the date you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Other (including a right to offset) First Mortgage Date debt was incurred 2010 Last 4 digits of account number Plata Add the dollar value of your entries in Column A on this page. Write that number here: \$210,034.41	(if known)				☐ Check	if this is an
Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more spas is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Part 1: List All Secured Claims 2. List all secured claims. If more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditor in Part 2. As any more than one creditor has a particular claim, list the other creditor in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim					amen	ded filing
Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more spas is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Part 1: List All Secured Claims 2. List all secured claims. If more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditor in Part 2. As any more than one creditor has a particular claim, list the other creditor in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim, list the other creditors in Part 2. As any more than one creditor has a particular claim	Official Forn	n 106D				
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more spas needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case supplying correct information. If more spas needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case and according to the top of any additional pages, write your name and case and according to the top of any additional pages, write your name and case and according to the top of any additional pages, write your name and case and according to the top of any additional pages, write your name and case and according to the top of any additional pages, write your name and case and according to the top of any additional pages, write your name and case and according to the top of any additional pages, write your name and case and according to the top of any additional pages, write your name and case and according to the top of any additional pages, write your name and case and according to the top of any additional pages, write your name and case and according to the top of any additional pages, write your name and case and according to the top of any additional pages, write your name and case and according to the top of any additional pages, write that to this form. On the top of any additional pages, write to the top of any additional pages, write that to this form. On the top of any additional pages, write that to this form. On the top of any additional pages, write that to this form. On the top of any additional pages, write that to this form. On the top of any additional pages, write that to this form. On the top of any additional pages, write that to this form. On the top of any additional pages, write that to this form. On the top of any additional pages, write that to this form. On the top of any additi			Who Hove Claims Secured	by Dranart		40/45
s needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Test All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. P O Box 105632 Atlanta, GA 30348 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 and Debtor 2 only Check if this claim relates to a community debt Date debt was incurred 2010 Last 4 digits of account number 9143 Add the dollar value of your entries in Column A on this page. Write that number here: \$210,034.41	schedule	D: Creditors	who have claims secured	by Propert	<u>y </u>	12/15
Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1:						
No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims List All Secured Claims List All Secured Claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As a mount of claim to not deduct the value of collateral. Wells Fargo Home Mortgage Describe the property that secures the claim: 2.1 Wells Fargo Home Mortgage Creditor's Name Describe the property that secures the claim: 23 Lorraine Loop Staten Island, NY 10309 Richmond County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred 2010 Last 4 digits of account number 9143 Add the dollar value of your entries in Column A on this page. Write that number here: \$210,034.41			out, number the entries, and attach it to this form. On	the top of any additio	nal pages, write your na	me and case
Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim by Value of collateral that supports this claims in alphabetical order according to the creditor's name. 2.1 Wells Fargo Home Mortgage Creditor's Name Describe the property that secures the claim: 2.2 Lorraine Loop Staten Island, NY 10309 Richmond County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who owes the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred 2010 Last 4 digits of account number Part 1: Column A Amount of claim Do not deduct the value of collateral that supports this claim is supports this claim is supports this claim. \$210,034.41 \$429,901.00 \$0.6 Column B Value of collateral that supports this claim is supports this claim is support in the value of collateral. Amount of claim Do not deduct the value of collateral. \$210,034.41 \$429,901.00 \$0.6 So.6 So.6 So.6 Sole of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Contingent Conti	. Do any creditors	have claims secured b	y your property?			
Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 Wells Fargo Home Mortgage Creditor's Name Describe the property that secures the claim: 23 Lorraine Loop Staten Island, NY 10309 Richmond County As of the date you file, the claim is: Check all that apply. Column A An under the value of collateral that supports this claim that supports this claim. \$210,034.41 \$429,901.00 \$0.4 \$0.4 \$429,901.00 \$0.4	☐ No. Checl	k this box and submit	his form to the court with your other schedules. Yo	u have nothing else t	to report on this form.	
Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name. 2.1 Wells Fargo Home Mortgage Creditor's Name Describe the property that secures the claim: 23 Lorraine Loop Staten Island, NY 10309 Richmond County As of the date you file, the claim is: Check all that apply. Column A An under the value of collateral that supports this claim that supports this claim. \$210,034.41 \$429,901.00 \$0.4 \$0.4 \$429,901.00 \$0.4	_		·	9	•	
2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As possible, list the claims in alphabetical order according to the creditor's name. 2.1 Wells Fargo Home Mortgage Creditor's Name Describe the property that secures the claim: 23 Lorraine Loop Staten Island, NY 10309 Richmond County P O Box 105632 Atlanta, GA 30348 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only A agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Last 4 digits of account number Date debt was incurred 2010 Column A Amount of claim Do not deduct the value of collateral Do not deduct the value of claim Do not deduct the value of claim Do not deduct the value of claim Do not deduct the value of collateral Massupports this claim supports this claim			below.			
Unsecured portion Manush as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the value of collateral. Do not deduct the value of collateral. Do not deduct the value of collateral. Supports this claim Sup				Column A	Column B	Column C
Wells Fargo Home Mortgage Creditor's Name Describe the property that secures the claim: 2.1 Wells Fargo Home Mortgage Creditor's Name Describe the property that secures the claim: 2 Lorraine Loop Staten Island, NY 10309 Richmond County P O Box 105632 Atlanta, GA 30348 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Add the dollar value of your entries in Column A on this page. Write that number here: Do not deduct the value of collateral. Po not deduct the value of collateral. that supports this claim portion if any portion laterale value of collateral. Pont deduct the value of collateral. Page value of co						
Describe the property that secures the claim: \$210,034.41 \$429,901.00 \$0.00						•
Describe the property that secures the claim: \$210,034.41 \$429,901.00 \$0.00	. Wells Far	ao Home		value of collateral.	Ciaim	ii any
P O Box 105632 Atlanta, GA 30348 Number, Street, City, State & Zip Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Add the dollar value of your entries in Column A on this page. Write that number here: \$250 contingent 10309 Richmond County As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) First Mortgage Add the dollar value of your entries in Column A on this page. Write that number here: \$210,034.41	Z. I I =	_	Describe the property that secures the claim:	\$210,034.41	\$429,901.00	\$0.00
As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	Creditor's Nam	e				
Atlanta, GA 30348 Number, Street, City, State & Zip Code Unliquidated Disputed Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) First Mortgage			10309 Richmond County			
Atlanta, GA 30348 Number, Street, City, State & Zip Code	P O Box 1	105632				
Number, Street, City, State & Zip Code Disputed			<u></u> ·			
Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred 2010 Add the dollar value of your entries in Column A on this page. Write that number here: Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) First Mortgage Add the dollar value of your entries in Column A on this page. Write that number here: \$210,034.41	<u>·</u>					
Who owes the debt? Check one. Debtor 1 only	rambor, Guec	, ony, clate a zip code	·			
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Date debt was incurred 2010 □ Last 4 digits of account number 9143 □ Add the dollar value of your entries in Column A on this page. Write that number here: \$210,034.41	Who owes the de	ebt? Check one.	•			
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Date debt was incurred 2010 □ Last 4 digits of account number 9143 □ Add the dollar value of your entries in Column A on this page. Write that number here: \$210,034.41	Debtor 1 only		☐ An agreement you made (such as mortgage or secu	ıred		
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Date debt was incurred 2010 □ Last 4 digits of account number 9143 □ Add the dollar value of your entries in Column A on this page. Write that number here: \$210,034.41	_ ′					
At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred 2010 Last 4 digits of account number 9143 Add the dollar value of your entries in Column A on this page. Write that number here: \$210,034.41	•	ebtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
Check if this claim relates to a community debt Date debt was incurred 2010 Last 4 digits of account number 9143 Add the dollar value of your entries in Column A on this page. Write that number here: \$210,034.41	_		_			
Add the dollar value of your entries in Column A on this page. Write that number here: \$210,034.41	☐ Check if this c	laim relates to a	= Chat Manter	age		
If this is the last new of your form add the dellar value totals from all news	Date debt was inc	urred 2010	Last 4 digits of account number 9143			
If this is the last new of your form add the dellar value totals from all news						
If this is the last new of your form add the dellar value totals from all news				4046.5	24.44	
		•	. •			

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Fill in this infor	mation to identify your o	ase:					
Debtor 1	Michael T Capalbo)					
20210	First Name	Middle Name	Last Nam	•			
Debtor 2	Barbara Capalbo						
(Spouse if, filing)	First Name	Middle Name	Last Nam	•			
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK				
Case number							
(if known)						☐ Chec	k if this is an
						amer	nded filing
Official For	m 106F/F						
	E/F: Creditors W	ho Have Unsecu	ıred Claim	s			12/15
any executory cor Schedule G: Exec Schedule D: Credi left. Attach the Co name and case nu	nd accurate as possible. Use tracts or unexpired leases utory Contracts and Unexpi tors Who Have Claims Secuntinuation Page to this pag umber (if known).	that could result in a claim. red Leases (Official Form 1 ired by Property. If more sp e. If you have no informatio	Also list executo 06G). Do not inclu ace is needed, co	ry contractide any cre py the Pai	cts on Schedule A/B: editors with partially rt you need, fill it out	Property (Official For secured claims that number the entries	orm 106A/B) and on are listed in in the boxes on the
	tors have priority unsecured						
□ No. Go to	• •						
Yes.							
possible, list the Part 1. If more	ype of claim it is. If a claim ha ne claims in alphabetical orde than one creditor holds a pa nation of each type of claim, s	r according to the creditor's n ticular claim, list the other cre	ame. If you have meditors in Part 3.	ore than tv			
2.1 Interna	I Revenue Service	Last 4 digits of	account number	8848	\$9,067.26		_
•	reditor's Name						<u> </u>
PO Bo	x 7346 elphia, PA 19101-7346	When was the	debt incurred?	2018		_	
	Street City State Zip Code		you file, the claim	is: Check	all that apply		
Who incurre	ed the debt? Check one.	☐ Contingent					
Debtor 1	only	☐ Unliquidated	I				
Debtor 2	only	☐ Disputed					
Debtor 1	and Debtor 2 only	·	ITY unsecured cla	im:			
_	-		pport obligations				
_	one of the debtors and anothe	<u> </u>	-				
	this claim is for a commun		ertain other debts y		-		
Is the claim	subject to offset?	_		ury wniie y	ou were intoxicated		
■ No □ Yes		Other. Speci	Federal Inc	omo Ta			_
Li res			reuerarin	Joine 1a			
	All of Your NONPRIORIT						
3. Do any credit	tors have nonpriority unsec	ured claims against you?					
☐ No. You ha	ave nothing to report in this pa	art. Submit this form to the co	urt with your other	chedules.			
Yes.							
unsecured cla	ur nonpriority unsecured cla im, list the creditor separately itor holds a particular claim, li	for each claim. For each clai	m listed, identify wl	at type of	claim it is. Do not list o	laims already include	d in Part 1. If more

Total claim

	Barbara Capalbo		Case number (if known)				
4.1	American Express	Last 4 digits of account number	1003	\$2,494.10			
	Nonpriority Creditor's Name PO Box 1270 Newark, NJ 07101-1270	When was the debt incurred?	2017-2019				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Consumer	Debt				
4.2	American Express	Last 4 digits of account number	1004	\$2,472.13			
	Nonpriority Creditor's Name PO Box 1270 Newark, NJ 07101-1270	When was the debt incurred?	2017-2019				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing					
	Yes	Other. Specify Consumer	Debt				
4.3	Bank of America Nonpriority Creditor's Name	Last 4 digits of account number	0152	\$519.24			
	PO Box 17234 Wilmington, DE 19850	When was the debt incurred?	2018-2019				
	Number Street City State Zip Code	As of the date you file, the claim					
	Who incurred the debt? Check one.						
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	Debts to pension or profit-sharir					
	☐ Yes	Other. Specify Consumer	- •				
	□ 169	Otner. Specify					

	or 2 Barbara Capalbo		Case number (if known)				
4.4	Barclay Card Services	Last 4 digits of account number	0027	\$791.00			
	Nonpriority Creditor's Name PO Box 8833 Wilmington, DE 19899-8833	When was the debt incurred?	2014				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Consumer	Debt				
4.5	Bergdorf Goodman	Last 4 digits of account number	1928	\$661.33			
	Nonpriority Creditor's Name PO Box 5235	When was the debt incurred?	2019				
	Carol Stream, IL 60197	_					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only						
	_	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	Type of NONPRIORITY unsecured claim:				
	☐ At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims	,				
	■ No	Debts to pension or profit-sharing					
	Yes	Other. Specify Consumer	Debt				
4.6	Best Buy Credit Services Nonpriority Creditor's Name	Last 4 digits of account number	8947	\$601.33			
	PO Box 9001007 Louisville, KY 40290	When was the debt incurred?	2019				
	Number Street City State Zip Code	As of the date you file, the claim					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	 Obligations arising out of a separeport as priority claims 	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharir	g plans, and other similar debts				
	☐ Yes	Other. Specify Consumer					
	_ 100	- Other, Specify					

	or 2 Barbara Capalbo		Case number (if known)	
4.7	Bloomingdale's	Last 4 digits of account number	3115	\$3,063.55
	Nonpriority Creditor's Name PO Box 78008 Phoenix A7 25063	When was the debt incurred?	2015-2019	
	Phoenix, AZ 85062 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer	Debt	
4.8	Bloomingdale's	Last 4 digits of account number	5820	\$1,461.80
	Nonpriority Creditor's Name PO Box 78008 Phoenix, AZ 85062	When was the debt incurred?	2018-2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Consumer	Debt	
4.9	Bloomingdale's Nonpriority Creditor's Name	Last 4 digits of account number	6656	\$121.45
	PO Box 78008 Phoenix, AZ 85062	When was the debt incurred?	2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only			
		☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans	u Olulli.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Consumer		
	☐ res	Other. Specify	Deni	

Debto Debto	r 1 Michael T Capalbo r 2 Barbara Capalbo		Case number (if known)	
4.1 0	Capital One	Last 4 digits of account number	8072	\$788.79
	Nonpriority Creditor's Name PO Box 6492 Carol Stream, IL 60197-6492	When was the debt incurred?	2018-2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer	Debt	-
4.1	Capital One	Last 4 digits of account number	0844	\$4,131.93
	Nonpriority Creditor's Name PO Box 6492 Carol Stream, IL 60197-6492	When was the debt incurred?	2014-2019	-
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer	Debt	
4.1	Capital One	Last 4 digits of account number	0456	\$762.83
	Nonpriority Creditor's Name PO Box 6492	When was the debt incurred?	2016-2019	
	Carol Stream, IL 60197-6492 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	7.6 of the date yearing, the staining	or check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer	Debt	-

	r 1 Michael I Capalbo r 2 Barbara Capalbo	Case number (if known)		
4.1	Capital One	Last 4 digits of account number	9510	\$1,049.85
	Nonpriority Creditor's Name PO Box 6492	When was the debt incurred?	2017-2019	
	Carol Stream, IL 60197-6492 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer	Debt	
4.1	Capital One	Last 4 digits of account number	5705	\$2,573.55
-	Nonpriority Creditor's Name	_		· · ·
	PO Box 6492 Carol Stream, IL 60197-6492	When was the debt incurred?	2018-2019	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Consumer	Debt	
4.1	Capital One/Neiman Marcus	Last 4 digits of account number	8633	\$3,591.05
<u>J</u>	Nonpriority Creditor's Name	_		· ,
	PO Box 5235 Carol Stream, IL 60197	When was the debt incurred?	2017-2019	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Consumer	Debt	

	r 2 Barbara Capalbo	Case number (if known)		
4.1	Capital One/Neiman Marcus	Last 4 digits of account number	8296	\$425.28
	Nonpriority Creditor's Name PO Box 5235	When was the debt incurred?	2019	
	Carol Stream, IL 60197 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	ls the claim subject to offset?	report as priority claims	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	•	
	Yes	Other. Specify Consumer D	Debt	
4.1 7	Capital One/Walmart	Last 4 digits of account number	9943	\$2,987.43
	Nonpriority Creditor's Name PO Box 4069 Carol Stream, IL 60197	When was the debt incurred?	2017-2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separ report as priority claims	ation agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify Consumer D	Debt	
4.1	Cardmember Service/Disney	Last 4 digits of account number	3159	\$3,071.84
	Nonpriority Creditor's Name PO Box 1423 Charlotte, NC 28201	When was the debt incurred?	2018-2019	
	Number Street City State Zip Code	As of the date you file, the claim is	: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt		ation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharing		
	☐ Yes	Other. Specify Consumer D	Debt	

	r 1 Michael I Capaibo r 2 Barbara Capalbo	Case number (if known)		
4.1 9	Cardmember Service/Disney	Last 4 digits of account number	9115	\$2,539.05
	Nonpriority Creditor's Name PO Box 1423	When was the debt incurred?	2018-2019	
	Charlotte, NC 28201 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Consumer	Debt	
4.2	Citi Cards	Last 4 digits of account number	0104	\$1,799.11
	Nonpriority Creditor's Name PO Box 70166	When was the debt incurred?	2018-2019	
	Philadelphia, PA 19176			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	<u> </u>			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	L.L.L.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	i ciaim:	
	☐ Check if this claim is for a community debt			
	Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Consumer		
4.2			0070	
1	Citi Cards	Last 4 digits of account number	<u>8878</u>	\$1,000.00
	Nonpriority Creditor's Name PO Box 70166	When was the debt incurred?	2019	
	Philadelphia, PA 19176			
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	•	report as priority claims Debts to pension or profit-sharin	a plane, and other similar dobts	
	■ No		= :	
	☐ Yes	Other. Specify Consumer	Dept	

Debto Debto	r 1 Michael T Capalbo r 2 Barbara Capalbo	Case number (if known)		
4.2	Comenity - BJ's	Last 4 digits of account number	8883	\$3,543.20
	Nonpriority Creditor's Name PO Box 659834	When was the debt incurred?	2017-2019	
	San Antonio, TX 78265-9134 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	g plans, and other similar debts		
	Yes	Other. Specify Consumer	Debt	
4.2	Comenity Bank/Lucky Brand	Last 4 digits of account number	6840	\$135.36
	Nonpriority Creditor's Name PO Box 659622	When was the debt incurred?	2019	
	San Antonio, TX 78265 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	O continuent		
	Debtor 2 only	☐ Contingent		
	Debtor 1 and Debtor 2 only	☐ Unliquidated		
		☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans	- O	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	nation agreement of divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer	Debt	
4.2	Comenity Bank/Sephora	Last 4 digits of account number	7748	\$443.88
	Nonpriority Creditor's Name PO Box 659820 San Antonio, TX 78265	When was the debt incurred?	2019	
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Consumer	- ·	
		- Other. Specify		

Debto Debto	or 1 Michael T Capalbo Dr 2 Barbara Capalbo	Case number (if known)		
4.2 5	Comenity/BedBath&Beyond	Last 4 digits of account number	1538	\$1,937.54
	Nonpriority Creditor's Name PO Box 659834	When was the debt incurred?	2017-2019	
	San Antonio, TX 78265 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer	Debt	
4.2	Comenity/Williams Sonoma	Last 4 digits of account number	8437	\$1,884.16
	Nonpriority Creditor's Name PO Box 659705	When was the debt incurred?	2018-2019	
	San Antonio, TX 78265 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer	Debt	
4.2 7	Credit One Bank	Last 4 digits of account number	3373	\$347.28
	Nonpriority Creditor's Name PO Box 60500 City of Industry, CA 91716	When was the debt incurred?	2019	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims	a plane and other similar data-	
	■ No	Debts to pension or profit-sharin	- ·	
	Yes	Other. Specify Consumer	Dept	

Debto Debto	or 1 Michael T Capalbo Dr 2 Barbara Capalbo	Case number (if known)			
4.2	Discover Financial Svcs	Last 4 digits of account number	7095	\$6,682.64	
	Nonpriority Creditor's Name PO Box 71084	When was the debt incurred?	2008-2019		
	Charlotte, NC 28272-1084 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ut of a separation agreement or divorce that you did not		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Consumer	Debt		
4.2	Discover Financial Svcs	Last 4 digits of account number	7405	\$15,162.66	
	Nonpriority Creditor's Name PO Box 71084	When was the debt incurred?	2017-2019		
	Charlotte, NC 28272-1084 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only				
	_	☐ Contingent			
	Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.		
	At least one of the debtors and another	Student loans	a ciaim:		
	☐ Check if this claim is for a community debt	_			
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	Other. Specify Consumer	Debt		
4.3	Home Depot Credit Svcs	Last 4 digits of account number	5247	\$828.85	
0	Nonpriority Creditor's Name	Last 4 digits of account number			
	PO Box 9001010 Louisville, KY 40290-1010	When was the debt incurred?	2018-2019		
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply		
	Who incurred the debt? Check one.	_			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	Other. Specify Consumer	- ·		
	_ 103	- Other. Specify			

Debte Debte	or 1 Michael T Capalbo or 2 Barbara Capalbo	Case number (if known)		
4.3 1	Home Depot Credit Svcs	Last 4 digits of account number	2574	\$251.25
	Nonpriority Creditor's Name PO Box 9001010	When was the debt incurred?	2019	
	Louisville, KY 40290-1010 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	\square Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer I	Debt	
4.3	HSBC Bank USA NA	Last 4 digits of account number	6846	\$5,084.73
	Nonpriority Creditor's Name PO Box 4657	When was the debt incurred?	2018-2019	. ,
	Carol Stream, IL 60197			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
	Debtor 1 only			
		☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	Lalaim	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	i ciaim:	
	☐ Check if this claim is for a community debt	_		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer I	Debt	
4.3	Internal Revenue Service	Look 4 digite of account number	8848	\$1,660.06
3	Nonpriority Creditor's Name	Last 4 digits of account number		Ψ1,000.00
	PO Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred?	2015	
	Number Street City State Zip Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	Student loans		
	ls the claim subject to offset?	□ Obligations arising out of a separate of the priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other Specify Federal Inc	ome Tax	

	or 2 Barbara Capalbo		Case number (if known)	
4.3	Merrick Bank	Last 4 digits of account number	5252	\$1,833.11
	Nonpriority Creditor's Name PO Box 660702	When was the debt incurred?	2018-2019	
	Dallas, TX 75266-0702 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer	Debt	
4.3 5	Mission Lane	Last 4 digits of account number	9527	\$2,343.78
	Nonpriority Creditor's Name PO Box 4517 Carol Stream, IL 60197	When was the debt incurred?	2018-2019	
	Number Street City State Zip Code	As of the date you file, the claim i		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer	Debt	
4.3	Nordstrom	Last 4 digits of account number	4831	\$7,996.93
	Nonpriority Creditor's Name PO Box 79139 Phoenix, AZ 85062	When was the debt incurred?	2016-2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Consumer	Debt	
		. ,		

	or 2 Barbara Capalbo	Case number (if known)		
4.3 7	Nordstrom	Last 4 digits of account number 0798	\$2,523.92	
	Nonpriority Creditor's Name PO Box 79137 Phoenix, AZ 85062	When was the debt incurred? 2019		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Consumer Debt		
4.3	Ollo Card Services	Last 4 digits of account number 1231	\$1,251.21	
0	Nonpriority Creditor's Name			
	PO Box 660371 Dallas. TX 75266	When was the debt incurred? 2017-2019		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only			
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Consumer Debt		
4.3	ReadyRefresh by Nestle	Last 4 digits of account number 7919	\$99.76	
9	Nonpriority Creditor's Name			
	#216	When was the debt incurred?		
	6661 Dixie Hwy, Suite 4			
	Louisville, KY 40258 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	nd another Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Consumer Debt		

Debto Debto	r 1 Michael T Capalbo r 2 Barbara Capalbo	Case number (if known)		
4.4	Saks Fifth Avenue	Last 4 digits of account number	6849	\$614.01
	Nonpriority Creditor's Name PO Box 71106	When was the debt incurred?	2019	
	Charlotte, NC 28272 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer	Debt	
4.4	Sears Credit Cards	Last 4 digits of account number	9293	\$112.04
	Nonpriority Creditor's Name PO Box 9001055	When was the debt incurred?	2019	
	Louisville, KY 40290-1055 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Consumer Debt		
4.4	Shop Your Way Mastercard	Last 4 digits of account number	5776	\$3,627.39
	Nonpriority Creditor's Name PO Box 9001104 Louisville, KY 40290-1104	When was the debt incurred?	2016-2019	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Consumer	- :	
	— 103	Other. Specify		

Debtor Debtor	r 1 Michael T Capalbo r 2 Barbara Capalbo	Case number (if known)		
4.4	Synchrony Bank/Amazon	Last 4 digits of account number	8224	\$914.37
	Nonpriority Creditor's Name PO Box 960013	When was the debt incurred?	2017-2019	
	Orlando, FL 32896-0013 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another			
	☐ Check if this claim is for a community	 ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 		
	debt Is the claim subject to offset?			
	■ No			
	☐ Yes ☐ Other. Specify Consumer Debt			
4.4	Synchrony Bank/HSN	Last 4 digits of account number	5637	\$82.42
	Nonpriority Creditor's Name PO Box 530905	When was the debt incurred?	2019	
	Atlanta, GA 30353 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Consumer Debt		
4.4	Synchrony Bank/JCP	Last 4 digits of account number	6001	\$801.84
	Nonpriority Creditor's Name PO Box 960090 Orlando, FL 32896-0090	When was the debt incurred?	2017-2019	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts		
	■ No	· · · · · · · · · · · · · · · · · · ·		
	Yes	Other. Specify Consumer	Denr	

Debtor Debtor	Michael T Capalbo Barbara Capalbo		Case number (if known)						
4.4 6	Synchrony Bank/Lowe's	Last 4 digits of account number	2460	\$2,847.55					
	Nonpriority Creditor's Name PO Box 530914	When was the debt incurred?	2016-2019						
	Atlanta, GA 30353 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply						
	■ Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not						
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts						
	Yes	Other. Specify Consumer	Debt						
4.4	Synchrony Bank/Lowe's	Last 4 digits of account number	8428	\$410.64					
	Nonpriority Creditor's Name PO Box 530914	When was the debt incurred?	2019						
	Atlanta, GA 30353 Number Street City State Zip Code Who incurred the debt? Check one.	s: Check all that apply							
	Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured							
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims							
	■ No	Debts to pension or profit-sharing							
	Yes	Other. Specify Consumer	Debt						
4.4	Synchrony Bank/QCard	Last 4 digits of account number	7093	\$287.21					
	Nonpriority Creditor's Name PO Box 530905 Atlanta, GA 30353	When was the debt incurred?	2018-2019						
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply						
	Who incurred the debt? Check one.								
	Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	Check if this claim is for a community debt		ration agreement or divorce that you did not						
	Is the claim subject to offset?	report as priority claims	a plane, and other similar debts						
	■ No	Debts to pension or profit-sharin							
	Yes	Other. Specify Consumer	Dept						

Debtor Debtor	1 Michael T Capalbo 2 Barbara Capalbo		Case number (if known)	
4.4 9	TD Bank NA	Last 4 digits of account number	1572	\$5,400.10
	Nonpriority Creditor's Name PO Box 100290 Columbia, SC 29202-3290	When was the debt incurred?	2017-2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-shari	ng plans, and other similar debts	
	Yes	Other. Specify Consumer	Debt	
4.5 0	Volkswagen Credit	Last 4 digits of account number	6531	Unknown
	Nonpriority Creditor's Name PO Box 5215 Carol Stream, IL 60197	When was the debt incurred?	2017	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Vehicle Le	ase	
Part 3:	List Others to Be Notified About a D	ebt That You Already Listed		
is tryi have i	nis page only if you have others to be notified ng to collect from you for a debt you owe to more than one creditor for any of the debts tl ed for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor in hat you listed in Parts 1 or 2, list the add	Parts 1 or 2, then list the collection agency	here. Similarly, if you
	nd Address	On which entry in Part 1 or Part 2 did you	_	
	nd Credit Management ox 301030		Part 1: Creditors with Priority Unsecured Clair	
	ngeles, CA 90030	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured (<i>Claims</i>
	nd Address	On which entry in Part 1 or Part 2 did you Line 4.1 of (<i>Check one</i>):	l list the original creditor? Part 1: Creditors with Priority Unsecured Clair	ns
PO Bo	ox 14581		Part 2: Creditors with Nonpriority Unsecured 0	
Des M	loines, IA 50306	Last 4 digits of account number	Tall 2. Gradiera Will Horiphority Gradeada	Sidiffic
	nd Address	On which entry in Part 1 or Part 2 did you Line 4.48 of (<i>Check one</i>):	list the original creditor? Part 1: Creditors with Priority Unsecured Clair	ns
Attn E	Bankruptcy Dept		Part 2: Creditors with Nonpriority Unsecured 0	
	ox 965060			
Oriano	do, FL 32896	Last 4 digits of account number		
Part 4	Add the Amounts for Each Type of	Jnsecured Claim		

Debtor 1	Michael T Capalbo	
Debtor 2	Barbara Capalbo	Case number (if known)

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
Total	6a.	Domestic support obligations	6a.	\$	0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	9,067.26
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	9,067.26
Total	6f.	Student loans	6f.	\$	Total Claim 0.00
claims from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ \$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	106,014.53
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	106,014.53

Fill in this infor	mation to identify your	case:		
Debtor 1	Michael T Capalb	0		
	First Name	Middle Name	Last Name	
Debtor 2	Barbara Capalbo			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK	
Case number				
(if known)				☐ Check if t amended

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Volkswagen Credit PO Box 5215 Carol Stream, IL 60197	36 Month lease on 2017 Volkswagon Passat beginning 7/16/2017

Fill in this inf	formation to identify your	case:		
Debtor 1	Michael T Capalb	0		
Dalatano	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	Barbara Capalbo First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK	
Case number				☐ Check if this is an
Official F	Form 106H			amended filing
Schedu	le H: Your Cod	ebtors		12/15
fill it out, and your name an		boxes on the left. Attach . Answer every question	n the Additional Page t	ion. If more space is needed, copy the Additional Pago this page. On the top of any Additional Pages, write as a codebtor.
■ No □ Yes				
	the last 8 years, have you California, Idaho, Louisiana,			y? (Community property states and territories include ington, and Wisconsin.)
■ No. Go □ Yes. D	o to line 3. iid your spouse, former spou	use, or legal equivalent live	e with you at the time?	
in line 2 a	again as a codebtor only i 6D), Schedule E/F (Official	f that person is a guaran	tor or cosigner. Make	if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offic 16G). Use Schedule D, Schedule E/F, or Schedule G to
	dumn 1: Your codebtor le, Number, Street, City, State and Zl	P Code		Column 2: The creditor to whom you owe the deb Check all schedules that apply:
3.1 Nam	ne			□ Schedule D, line
				☐ Schedule G, line
Num City		State	ZIP Code	_
3.2				☐ Schedule D, line
Nan	ile			☐ Schedule E/F, line ☐ Schedule G, line
Num City		State	ZIP Code	_

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						_				
	in this information to identify your optor 1 Michael T C									
	otor 2 Barbara Ca	•			_					
	ted States Bankruptcy Court for the	e: _EASTERN DISTRICT	OF NEW YORK							
	se number nown)		-			☐ An		nt showing	g postpetition ollowing date:	chapter
0	fficial Form 106I					MN	M / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/15
spo atta	plying correct information. If you use. If you are separated and yo ch a separate sheet to this form. Describe Employment information.	ur spouse is not filing w On the top of any additi	ith you, do not inclu	de infor	mati	on about y d case nur	your spo mber (if I	ouse. If mo	ore space is	needed,
	If you have more than one job,		■ Employed				☐ Emplo		g oposio	
	attach a separate page with information about additional	Employment status	☐ Not employed				■ Not er	•		
	employers.	Occupation	Retired							
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	there?				_			
Par	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to re	eport for	any	line, write S	\$0 in the	space. Inc	clude your nor	n-filing
	u or your non-filing spouse have me space, attach a separate sheet to		ombine the information	n for all e	empl	oyers for th	nat perso	n on the lir	nes below. If y	you need
						For Debt	or 1		otor 2 or ng spouse	
2.	List monthly gross wages, sale deductions). If not paid monthly,			2.	\$		0.00	\$	0.00	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	0.00	
4.	Calculate gross Income. Add I	ine 2 + line 3.		4.	\$	(0.00	\$	0.00	

Official Form 106I Schedule I: Your Income page 1

Debt Debt		Michael T Capalbo Barbara Capalbo		Case	number (if known)				
				For	Debtor 1		r Debtor n-filing s		
	Сор	y line 4 here	4.	\$	0.00	\$		0.00	-
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$		0.00	- -
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$_		0.00	_
	5e. 5f.	Insurance	5e. 5f.	\$ \$	0.00	\$_ \$		0.00	-
	5g.	Domestic support obligations Union dues	51. 5g.	-\$ -	0.00	\$_		0.00	_
	5h.	Other deductions. Specify:	5h.+	\$_	0.00			0.00	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	– 6.	\$	0.00	\$		0.00	-
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ \$	0.00	* \$		0.00	-
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		* _	0.00	* _		0.00	-
		monthly net income.	8a.	\$	0.00	\$		0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$_		0.00	_
	8d.	Unemployment compensation	8d.	\$	0.00	\$		0.00	_
	8e.	Social Security	8e.	\$_	0.00	\$_		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	_ 8f.	\$_	0.00	\$_		0.00	_
	8g.	Pension or retirement income	8g.	\$_	3,281.77	\$_		0.00	-
	8h.	Other monthly income. Specify: Retirement withdrawal	_ 8h.+ _	\$_ \$		+ \$_ 		0.00	_
		Daughter's Contribution	_	Φ_	700.00	, -		0.00	- ¬
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	4,781.77	\$_		0.00	0
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$		4,781.77 + \$		0.00	= \$	4,781.77
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L						
11.									
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain ites					12.	\$	4,781.77
13.	Do y	ou expect an increase or decrease within the year after you file this form?	?					monthl	y income
	_	Yes. Explain:							
	-	<u> </u>							

Official Form 106l Schedule I: Your Income page 2

Fill	in this information to identify	your case:					
Deb	otor 1 Michael T	Capalbo			Che	eck if this is:	
D-1		•				An amended filing	de en en este el Compete de entre e
	otor 2 Barbara C	apalbo				A supplement show 13 expenses as of	ving postpetition chapter the following date:
Linit	ted States Bankruptcy Court for	the FASTE	RN DISTRICT OF NEW YO) NRK		MM / DD / YYYY	
	. ,	une. LAOTE	INVESTIGATION OF NEW TO			WIWI / DD / TTTT	
l	se number nown)						
	fficial Form 106	·					
	chedule J: You						12/15
info	as complete and accurate ormation. If more space is mber (if known). Answer e	needed, atta	ach another sheet to this				
	t 1: Describe Your Hou	ısehold					
1.	Is this a joint case?						
	□ No. Go to line 2.						
	Yes. Does Debtor 2 liv	e in a sepai	ate household?				
	■ No □ Yes. Debtor 2 r	nust file Offic	ial Form 106J-2, <i>Expenses</i>	for Separate House	hold of Del	otor 2.	
2.	Do you have dependents	s? ■ No					
	Do not list Debtor 1 and Debtor 2.	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the						□ No
	dependents names.						Yes
							□ No
							☐ Yes ☐ No
							☐ Yes
							□ No
							☐ Yes
3.	Do your expenses include		l _{No}			_	
	expenses of people other yourself and your depen		l Yes				
Est exp	tt 2: Estimate Your Ong timate your expenses as o penses as of a date after the plicable date.	f your bankr	uptcy filing date unless y				
the	lude expenses paid for wi value of such assistance ficial Form 106l.)					Your exp	enses
(0)	notar i orini root.						
4.	The rental or home owner payments and any rent for		nses for your residence. In or lot.	nclude first mortgage	4.	\$	1,836.73
	If not included in line 4:						
	4a. Real estate taxes				4a.	\$	0.00
	4b. Property, homeown				4b.	\$	0.00
	4c. Home maintenance				4c.		25.00
5.	4d. Homeowner's associated Additional mortgage pay		dominium dues our residence , such as ho	me equity loans	4d. 5.	·	75.00 0.00
◡.				no oddity iodilo	υ.	_	V.VV

ebtor 1	Michael I Capalbo			
ebtor 2	Barbara Capalbo	Case num	ber (if known)	
. Util	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	287.00
6b.	Water, sewer, garbage collection	6b.	\$	50.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	235.00
6d.	Other. Specify:	6d.	\$	0.00
Foo	od and housekeeping supplies	7.	\$	450.00
Chi	Idcare and children's education costs	8.	\$	0.00
Clo	thing, laundry, and dry cleaning	9.	\$	35.00
. Per	sonal care products and services	10.	\$	25.00
. Med	dical and dental expenses	11.	\$	50.00
. Tra	nsportation. Include gas, maintenance, bus or train fare.			
	not include car payments.	12.	\$	80.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	40.00
. Cha	aritable contributions and religious donations	14.	\$	0.00
	urance.			
	not include insurance deducted from your pay or included in lines 4 or 20.	45-	c	0.00
	. Life insurance . Health insurance	15a. 15b.		0.00
			*	868.66
	. Vehicle insurance		\$	252.72
	l. Other insurance. Specify:	15d.	\$	0.00
	res. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify: IRS Debt	16.	¢	148.00
	tallment or lease payments:		Ψ	140.00
	. Car payments for Vehicle 1	17a.	\$	246.55
	Car payments for Vehicle 2	17b.		0.00
	Other. Specify:	17c.	\$	0.00
	l. Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not repo		<u> </u>	0.00
	lucted from your pay on line 5, Schedule I, Your Income (Official Form 10		\$	0.00
Oth	er payments you make to support others who do not live with you.	,	\$	0.00
Spe	ecify:	19.		
	er real property expenses not included in lines 4 or 5 of this form or on	Schedule I: Yo	our Income.	
20a	. Mortgages on other property	20a.		0.00
20b	. Real estate taxes	20b.	\$	0.00
20c		20c.	\$	0.00
	l. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues		\$	0.00
. Oth	er: Specify:	21.	+\$	0.00
Cal	culate your monthly expenses			
	. Add lines 4 through 21.		\$	4,704.66
	c. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106	J-2	\$	4,104.00
	Add line 22a and 22b. The result is your monthly expenses.		\$	4,704.66
220	. Add into 22a and 22b. The result is your monthly expenses.		Ψ	4,704.00
	culate your monthly net income.			
	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	4,781.77
23b	. Copy your monthly expenses from line 22c above.	23b.	-\$	4,704.66
_				
23c	Subtract your monthly expenses from your monthly income.	23c.	\$	77.11
	The result is your monthly net income.	236.	Ψ	77.11
For	you expect an increase or decrease in your expenses within the year aft example, do you expect to finish paying for your car loan within the year or do you expect lification to the terms of your mortgage?			se or decrease because o
I	No.			
_ ·				

Fill in this info	rmation to identify your	case:			
Debtor 1	Michael T Capalb	0			
	First Name	Middle Name	Last Name		
Debtor 2	Barbara Capalbo				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK		
Case number					
(if known)					☐ Check if this is an
					amended filing
Declara	tion About a	n Individual	Debtor's Sch	edules	12/15
f two married p	people are filing together	, both are equally respon	sible for supplying correc	ct information.	
V		la la audiminitari a di a dista a			
					ment, concealing property, or), or imprisonment for up to 20
	18 U.S.C. §§ 152, 1341, 1		aptoy odoo odii roodii iir i	up to 4200,000	,, op.1.001101. up to 20
Sid	gn Below				
Sig	gii below				
Did you p	ay or agree to pay some	one who is NOT an attorn	ney to help you fill out ban	kruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bank	ruptcy Petition Preparer's Notice,
				Declaration,	and Signature (Official Form 119)
		that I have read the sumn	nary and schedules filed v	with this declaration	n and
that they a	re true and correct.				
X /s/ Mic	chael T Capalbo		X /s/ Barbara C	Capalbo	
	ael T Capalbo		Barbara Cap		
	ure of Debtor 1		Signature of De		
Date	January 8, 2020		Date Janua i	ry 8, 2020	
				• • •	

Fill	in th	is informa	ation to identify your	case:					
Del	btor 1		Michael T Capall	00					
Dal	btor 2		First Name	Middle Name		Last Name			
1	ouse if,		Barbara Capalbo First Name	Middle Name		Last Name			
Uni	ited S	tates Bank	cruptcy Court for the:	EASTERN DISTRICT C	F NEW	ORK			
	se nu	mber							eck if this is an ended filing
St	ate	ment d		Affairs for Indiv				for suppl	4/19
info nun	rmati	ion. If mo (if known) _	re space is needed, . Answer every ques	attach a separate sheet t	o this for	m. On the top of an			
1.	Wha	at is your o	current marital statu	s?					
		Married Not marri	ed						
2.	Duri	ing the las	st 3 years, have you l	ived anywhere other that	n where	you live now?			
		No Yes. List	all of the places you li	ved in the last 3 years. Do	not includ	de where you live nov	v.		
	Dek	otor 1 Pric	or Address:	Dates Debtor lived there	1	Debtor 2 Prior Ac	ldress:		Dates Debtor 2 lived there
3. stat				er live with a spouse or lo fornia, Idaho, Louisiana, N					
		No Yes. Mak	e sure you fill out <i>Sch</i>	edule H: Your Codebtors (Official Fo	orm 106H).			
Pa	rt 2	Explain	the Sources of Your	Income					
4.	Fill i	n the total	amount of income you	ployment or from operat received from all jobs and nave income that you rece	d all busin	esses, including part	-time activities.	us calend	lar years?
		No Yes. Fill in	n the details.						
				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	(befo	ss income ore deductions and usions)	Sources of income Check all that apply		Gross income (before deductions and exclusions)

Official Form 107

Did				albo				se number (if known)		
Inclu and	ide inc other p	ome re oublic b	gardl enefi	ess of whetl t payments;	ne during this year or the that income is taxab pensions; rental income se and you have income	le. Examples o e; interest; divid	f <i>other income</i> are dends; money colle	alimony; child supp cted from lawsuits;	royalties; and	
List e	each s	ource a	and th	ne gross inc	ome from each source s	eparately. Do r	not include income	that you listed in lir	ne 4.	
	No			o .		, ,		•		
		Fill in th	e det	ails.						
					5.1.			5.17		
					Debtor 1 Sources of income	Gross	s income from	Debtor 2 Sources of inc	come	Gross income
					Describe below.		source re deductions and sions)	Describe below	<i>I</i> .	(before deductions and exclusions)
or last January				31, 2019)	Retirement Incom	e	\$39,381.00			
				ore that: 31, 2018)	Retirement Income	е	\$41,556.00			
					Retirement Withdrawal		\$24,847.00			
or the o				31, 2017)	Retirement Incom	e	\$41,556.00			
					Retirement		\$22,404.00			
					Withdrawal		. ,			
Part 3: Are □		Debto Neithe	r 1's er De	or Debtor 2 btor 1 nor I	ı Made Before You File 2's debts primarily con Debtor 2 has primarily	sumer debts? consumer del	ots. Consumer deb	ts are defined in 11	I U.S.C. § 10	I (8) as "incurred by an
Are	either	Debto Neithe	r 1's er De	or Debtor 2 btor 1 nor I	ı Made Before You File	sumer debts? consumer del	ots. Consumer deb	ts are defined in 11	I U.S.C. § 10 ⁷	I (8) as "incurred by an
Are	either	Debto Neithe individ	r 1's er De lual p	or Debtor 2 btor 1 nor I rimarily for a	I Made Before You File I's debts primarily con Debtor 2 has primarily a personal, family, or ho ore you filed for bankrup	sumer debts? consumer debusehold purpos	ots. Consumer deb			I (8) as "incurred by an
Are	either	Debto Neither individed During	r 1's er De lual p the s	or Debtor 2 btor 1 nor I rimarily for a 90 days before Go to line 7	I Made Before You File I's debts primarily con Debtor 2 has primarily a personal, family, or ho ore you filed for bankrup 7.	sumer debts? consumer del usehold purpos etcy, did you pa	ots. Consumer deb e." y any creditor a tot	al of \$6,825* or mo	ore?	
Are	either	Debto Neithe individ During N	r 1's er De ual p the o.	or Debtor 2 btor 1 nor I rimarily for a 90 days befor Go to line 7 List below paid that cr	I Made Before You File I's debts primarily con Debtor 2 has primarily a personal, family, or ho ore you filed for bankrup	sumer debts? consumer debt usehold purpos otcy, did you pa ou paid a total ayments for do y for this bankr	ots. Consumer deb se." y any creditor a tot of \$6,825* or more mestic support obli- cuptcy case.	al of \$6,825* or mo in one or more pay gations, such as ch	ore? yments and the	ne total amount you nd alimony. Also, do
Are	either No.	Debto Neither individed During North	r 1's er De ual p the o. es	or Debtor 2 btor 1 nor I rimarily for a 90 days befor Go to line 7 List below paid that co not include to adjustment	I Made Before You File I's debts primarily con Debtor 2 has primarily a personal, family, or ho ore you filed for bankrup 7. each creditor to whom y reditor. Do not include p a payments to an attorne	sumer debts? consumer debts: usehold purpos tcy, did you pa ou paid a total ayments for do y for this bankr years after th consumer debt	ots. Consumer deb se." y any creditor a tot of \$6,825* or more mestic support obli ruptcy case. at for cases filed or ots.	al of \$6,825* or mo in one or more pay gations, such as ch n or after the date o	ore? yments and the hild support a	ne total amount you nd alimony. Also, do
Are	either No.	Debto Neither individed individed individed individed individed individed individed individual indi	r 1's er De ual p the s o. es ject t	or Debtor 2 btor 1 nor I rimarily for a 90 days befor Go to line 7 List below paid that co not include to adjustmen r Debtor 2 c 90 days befor	I Made Before You File 2's debts primarily con Debtor 2 has primarily a personal, family, or ho ore you filed for bankrup 7. each creditor to whom y reditor. Do not include p payments to an attorne at on 4/01/22 and every or both have primarily ore you filed for bankrup	sumer debts? consumer debts: usehold purpos tcy, did you pa ou paid a total ayments for do y for this bankr years after th consumer debt	ots. Consumer deb se." y any creditor a tot of \$6,825* or more mestic support obli ruptcy case. at for cases filed or ots.	al of \$6,825* or mo in one or more pay gations, such as ch n or after the date o	ore? yments and the hild support a	ne total amount you nd alimony. Also, do
Are	either No.	Debto Neither individed During North	r 1's r 1's r De ual p the o. es ject t r 1 o the o.	or Debtor 2 btor 1 nor I rimarily for a 90 days befor Go to line 7 List below paid that cr not include o adjustmen r Debtor 2 c 90 days befor Go to line 7 List below include pay	I Made Before You File 2's debts primarily con Debtor 2 has primarily a personal, family, or ho ore you filed for bankrup 7. each creditor to whom y reditor. Do not include p payments to an attorne at on 4/01/22 and every or both have primarily ore you filed for bankrup	sumer debts? consumer debtusehold purpos otcy, did you pa ou paid a total ayments for do y for this bankr 3 years after th consumer deb otcy, did you pa	ots. Consumer deb se." y any creditor a toto of \$6,825* or more mestic support oblitation cases at for cases filed or ots. y any creditor a toto of \$600 or more an	al of \$6,825* or mo in one or more pay gations, such as ch or after the date of al of \$600 or more?	ore? yments and the control of adjustment. you paid that	ne total amount you nd alimony. Also, do creditor. Do not
Are □	either No.	Debto Neither individ During N Y * Sub Debto During N N Y	r 1's Per De Proposition of the state of the	or Debtor 2 btor 1 nor I rimarily for a 90 days befor Go to line 7 List below paid that cr not include o adjustmen r Debtor 2 c 90 days befor Go to line 7 List below include pay	I Made Before You File I's debts primarily con Debtor 2 has primarily a personal, family, or ho ore you filed for bankrup 7. each creditor to whom y reditor. Do not include p p payments to an attorne at on 4/01/22 and every or both have primarily ore you filed for bankrup 7. each creditor to whom y yments for domestic sup	sumer debts? consumer debts? consumer debts usehold purpos ou paid a total ayments for do y for this bankr 3 years after th consumer deb tcy, did you pa ou paid a total uport obligations	ots. Consumer deb se." y any creditor a toto of \$6,825* or more mestic support oblitation cases at for cases filed or ots. y any creditor a toto of \$600 or more an	al of \$6,825* or mo in one or more pay gations, such as ch or after the date of al of \$600 or more?	ore? yments and the hild support and adjustment. ? you paid that Also, do not in	ne total amount you nd alimony. Also, do creditor. Do not

Debtor 1 Michael T Capalbo

Der	otor 2 Barbara Capalbo		Cas	se number (if known)	
	One Blands Names and Addisons	Data of manner	T-1-1	A	W 41.1	
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	was this pa	yment for
	Volkswagen Credit PO Box 5215	Oct, Nov & Dec 2019	\$739.65	Unknown	☐ Mortgage ■ Car	•
	Carol Stream, IL 60197				☐ Credit Ca	ard
					☐ Loan Re _l	payment
					☐ Suppliers ☐ Other	or vendors
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. A alimony.	artners; relatives of any ger n control, or owner of 20% of	neral partners; partners partners or more of their voting	erships of which yog g securities; and a	ou are a genera any managing a	al partner; corporation gent, including one fo
	■ No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider?	cy, did you make any pay	ments or transfer a	any property on a	account of a d	ebt that benefited an
	Include payments on debts guaranteed or cos	signed by an insider.				
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Par	t 4: Identify Legal Actions, Repossessio	Farralassuras				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below.		erty repossessed, f	oreclosed, garni	shed, attached	I, seized, or levied?
	Creditor Name and Address	Describe the Property		Date	•	Value of the property
		Explain what happene	d			ргоренту
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No		luding a bank or fi	nancial institutio	n, set off any a	mounts from your
	Yes. Fill in the details.					
	Creditor Name and Address	Describe the action the	e creditor took	Date take	action was n	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess	ion of an assigne	ee for the bene	efit of creditors, a

Debtor 1 Michael T Capalbo

		Michael T Capalbo Barbara Capalbo		Case number	(if known)	
Pa	rt 5:	List Certain Gifts and Contribution	ns			
13.	■ N	•	ruptcy	, did you give any gifts with a total value of more t	han \$600 per person	?
		with a total value of more than \$6	00	Describe the gifts	Dates you gave the gifts	Value
	Perso Addre	on to Whom You Gave the Gift and ess:	t			
14.	■ N			did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	Gifts more Chari	or contributions to charities that than \$600 ty's Name ess (Number, Street, City, State and ZIP Coo	total	Describe what you contributed	Dates you contributed	Value
Pa	rt 6:	List Certain Losses				
15.		1 year before you filed for bankronbling?	uptcy c	or since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster
	■ N	o es. Fill in the details.				
		ribe the property you lost and the loss occurred	Includ	ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pa	rt 7:	List Certain Payments or Transfer	's			
16.	Include	Ited about seeking bankruptcy or any attorneys, bankruptcy petition	prepai	did you or anyone else acting on your behalf pay ring a bankruptcy petition? ers, or credit counseling agencies for services require		rty to anyone you
	Perso Addre Email	on Who Was Paid	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	1200	sh & Hollender PC South Ave Ste 201 en Island, NY 10314		See Disclosure of Compensation Statement		\$0.00
17.	promis		ditors	did you or anyone else acting on your behalf pay or to make payments to your creditors? sted on line 16.	or transfer any prope	rty to anyone who
	■ No	o es. Fill in the details.				
	Perso Addre	on Who Was Paid ess		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

	tor 2 Barbara Capalbo	Case number (if known)				
	Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers minclude gifts and transfers that you have alread No Yes. Fill in the details.	usiness or financial affa ade as security (such as	airs? the granting of a		. , , , , .	
	Person Who Received Transfer Address	Description and value of property transferred		Describe any property or payments received or debts paid in exchange		Date transfer was made
19.	Person's relationship to you 9. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.					
	Name of trust	Description and	value of the prop	perty trans	sferred	Date Transfer was made
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, asso No Yes. Fill in the details.	ry, were any financial accou	ccounts or instru	uments he	eld in your name, or for y	
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
	Janney Montgomery Scott LLC c/o Gideon Evans & Frederick Linden 6000 Sagemore Dr Ste 6201 Marlton, NJ 08053	XXXX-9997	☐ Checking ☐ Savings ☐ Money Mari ☐ Brokerage ☐ Other IRA		1/14/2019	\$5,951.00
21.	Do you now have, or did you have within 1 cash, or other valuables? No Yes. Fill in the details.	year before you filed fo	r bankruptcy, ar	ny safe dep	posit box or other depos	sitory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit of the No Yes. Fill in the details.	or place other than you	r home within 1	year befoi	re you filed for bankrupt	cy?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?

_	otor 2 Barbara Capalbo		Ca	ase number (if known)	
Par	t 9: Identify Property You Hold or Control for	Someone Else			
23.	Do you hold or control any property that some for someone.	one else owns? Include any prop	erty y	ou borrowed from, are storing for	, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	escribe the property	Value
Par	t 10: Give Details About Environmental Inform	ation			
For	the purpose of Part 10, the following definitions	apply:			
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul	nir, land, soil, surface water, grou	_	•	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	-	ıl law	, whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or	mental law defines as a hazardo	us wa	aste, hazardous substance, toxic s	substance,
Rep	ort all notices, releases, and proceedings that ye	ou know about, regardless of wh	en th	ey occurred.	
24.	Has any governmental unit notified you that you	u may be liable or potentially liab	le un	der or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?			
	■ No				
	Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	strative proceeding under any en	viron	nmental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case
Par	t 11: Give Details About Your Business or Con	nnections to Any Business			
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	any o	of the following connections to any	business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activit	y, eiti	her full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partners	ship (LLP)	
	☐ A partner in a partnership				
	☐ An officer, director, or managing execu	tive of a corporation			
	☐ An owner of at least 5% of the voting or	equity securities of a corporatio	n		

Official Form 107

Debtor 1 Michael T Capalbo Debtor 2 Barbara Capalbo	Case number (if known)
■ No. None of the above applies. Go to □ Yes. Check all that apply above and fil	Part 12. I in the details below for each business.
Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. Name of accountant or bookkeeper Dates business existed
 Within 2 years before you filed for bankrup institutions, creditors, or other parties. 	tcy, did you give a financial statement to anyone about your business? Include all financial
Yes. Fill in the details below.	
Name Address (Number, Street, City, State and ZIP Code)	Date Issued
Part 12: Sign Below	
are true and correct. I understand that making a	nancial Affairs and any attachments, and I declare under penalty of perjury that the answers a false statement, concealing property, or obtaining money or property by fraud in connection \$250,000, or imprisonment for up to 20 years, or both.
/s/ Michael T Capalbo	/s/ Barbara Capalbo
Michael T Capalbo	Barbara Capalbo
Signature of Debtor 1	Signature of Debtor 2
Date January 8, 2020	Date January 8, 2020
Did you attach additional pages to Your Statem	ent of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	
□ Yes	
Did you pay or agree to pay someone who is no ■ No	t an attorney to help you fill out bankruptcy forms?
☐ Yes. Name of Person Attach the Bankru	uptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inform	ation to identify your c	ase:			
Debtor 1	Michael T Capalbo)			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Barbara Capalbo First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	EASTERN DISTR	RICT OF NEW YORK		
Case number					
(if known)					Check if this is an amended filing
Official For Statemen		n for Indiv	/iduals Filing Unde	r Chapter 7	7 12/15
•	ridual filing under chap claims secured by you		Il out this form if:		
		• •	ant avairad		
You must file this	er is earlier, unless the	thin 30 days after	you file your bankruptcy petition or e time for cause. You must also sen		
•	ople are filing together I date the form.	in a joint case, bo	oth are equally responsible for suppl	lying correct inforn	nation. Both debtors must
	nd accurate as possibl ur name and case num		s needed, attach a separate sheet to	this form. On the t	op of any additional pages,
Part 1: List Yo	ur Creditors Who Have	Secured Claims			
		rt 1 of Schedule D	: Creditors Who Have Claims Secur	ed by Property (Off	ficial Form 106D), fill in the
information bel	ow. ditor and the property th	at is collateral	What do you intend to do with the secures a debt?	e property that	Did you claim the property as exempt on Schedule C?
Creditor's W o	ells Fargo Home Mo	rtgage	☐ Surrender the property. ☐ Retain the property and redeem	ı it.	□ No
Description of	22	tatan lalamd	Retain the property and enter int		Yes
	23 Lorraine Loop S NY 10309 Richmor		Reaffirmation Agreement.		
property securing debt:		,	Retain the property and [explain]]: 	
Part 2: List Yo	ur Unexpired Personal	Property Leases			
For any unexpired in the information	d personal property lea below. Do not list real	se that you listed estate leases. Ur	in Schedule G: Executory Contracts nexpired leases are leases that are s the trustee does not assume it. 11 U	till in effect; the lea	eases (Official Form 106G), fill use period has not yet ended.
Describe your un	nexpired personal prop	erty leases		Wil	I the lease be assumed?
Lessor's name:	Volkswagen Cr	edit			No
				•	Yes
Description of least Property:	sed 36 Month lease	on 2017 Volks	wagon Passat beginning 7/16/20	17	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 Debtor 2	Michael T Capalbo Barbara Capalbo	Case number (if known)
	•	
	_	
Part 3:	Sign Below	
property	nalty of perjury, I declare that I have indicated that is subject to an unexpired lease. Michael T Capalbo	my intention about any property of my estate that secures a debt and any personal X /s/ Barbara Capalbo
Mic	hael T Capalbo	Barbara Capalbo
Sigi	nature of Debtor 1	Signature of Debtor 2
Dat	∍ January 8, 2020	Date January 8, 2020

	eck one box only as d 2A-1Supp:	irected in this form and in F	Form
Debtor 2 (Spouse, if filing) United States Bankruptcy Court for the: Eastern District of New York Case number (if known)	applies will be n Calculation (Off 3. The Means Test	o determine if a presumption ade under <i>Chapter 7 Mea</i> icial Form 122A-2). does not apply now becaute service but it could apply	nns Test use of
Official Form 122A - 1 Chapter 7 Statement of Your Current Monthly Inc		n amended ming	12/19
Be as complete and accurate as possible. If two married people are filing together, both are equal attach a separate sheet to this form. Include the line number to which the additional information a case number (if known). If you believe that you are exempted from a presumption of abuse because qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Part 1: Calculate Your Current Monthly Income	applies. On the top of airse you do not have prir	ny additional pages, write yo narily consumer debts or be	our name and cause of
What is your marital and filing status? Check one only. ☐ Not married. Fill out Column A, lines 2-11. ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines ☐ Married and your spouse is NOT filing with you. You and your spouse are:	2-11.		
☐ Living in the same household and are not legally separated. Fill out both Col ☐ Living separately or are legally separated. Fill out Column A, lines 2-11; do not penalty of perjury that you and your spouse are legally separated under nonban living apart for reasons that do not include evading the Means Test requirements.	ot fill out Column B. By	checking this box, you deces or that you and your spo	
Fill in the average monthly income that you received from all sources, derived during the 6 ful 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include spouses own the same rental property, put the income from that property in one column only. If you have	ugh August 31. If the amode any income amount m	ount of your monthly income va ore than once. For example, if	aried during both
	Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
 Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. All amounts from any source which are regularly paid for household expenses 	\$	\$ 0.00 \$ 0.00	

Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property

Gross receipts (before all deductions)

filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, or farm

> Debtor 1 0.00

Debtor 1 0.00

0.00 Copy here -> \$

0.00

0.00

0.00

\$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses

of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not

0.00 Copy here -> \$ 0.00 0.00 Net monthly income from rental or other real property 0.00 \$ 0.00 7. Interest, dividends, and royalties

-\$

Official Form 122A-1

0.00

0.00

Debto				Case r	number (<i>if known</i>)			
				Colum Debto		Column E Debtor 2 non-filing	or	
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amoun the Social Security Act. Instead, list it here:	t received was a benef	it under					
	For you \$	0.	00					
	For your spouse \$	0.	00					
9.	Pension or retirement income. Do not include any and benefit under the Social Security Act. Also, except as a not include any compensation, pension, pay, annuity, or United States Government in connection with a disability disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that does not exceed the amount of retired pay to which you if retired under any provision of title 10 other than chapter 10 other 10 other than chapter 10 other	nount received that wa tated in the next sente or allowance paid by the ty, combat-related injur- es. If you received any pay only to the extent to u would otherwise be e	nce, do e ry or retired hat it	\$	3,281.77	\$	0.00	
10.	Income from all other sources not listed above. Specific Do not include any benefits received under the Social Specieved as a victim of a war crime, a crime against hur domestic terrorism; or compensation, pension, pay, and United States Government in connection with a disability disability, or death of a member of the uniformed service sources on a separate page and put the total below.	Security Act; payments manity, or international nuity, or allowance paid ty, combat-related injuity	or d by the ry or					
	·			\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
11.	Calculate your total current monthly income. Add lir each column. Then add the total for Column A to the to		\$	3,281.7	77 + \$ _	0.00		3,281.77
Part	2: Determine Whether the Means Test Applies t	o You					income	rent monthly
12.	Calculate your current monthly income for the year	. Follow these steps:						
	12a. Copy your total current monthly income from line	11			Copy line 11 h	nere=>	\$3	3,281.77
	Multiply by 12 (the number of months in a year)						x 12	2
	12b. The result is your annual income for this part of th	e form				12	2b. \$39	9,381.24
13.	Calculate the median family income that applies to	you. Follow these step	s:					
	Fill in the state in which you live.	NY						
	Fill in the number of people in your household.	2						
	Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link sp	pecified	in the s	eparate instruc	13 tions	3. \[\$ 7 1	,349.00
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official		eck box	1, Thei	re is no presum	ption of abu	ıse.	
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2.		The pro	esumpti	on of abuse is	determined	by Form 122	A-2.
Part	3: Sign Below							
	By signing here, I declare under penalty of perjury	that the information or	n this sta	atement	and in any atta	achments is	true and cor	rect.
	X /s/ Michael T Capalbo	x /	s/ Bark	oara Ca	apalbo			
	Michael T Capalbo Signature of Debtor 1		Barbara		lbo			

Debtor 1 Debtor 2	Michael T Capalbo Barbara Capalbo			Case number (if known)	
Da	MM / DD / YYYY	Date	January MM / DD		
	If you checked line 14a, do NOT fill out or file Form 122A-2.				
	If you checked line 14b, fill out Form 122A-2 and file it with this	form.			

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

In	Michael T Capalbo re Barbara Capalbo	Case No.	
	Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSATION OF ATTO	RNEY FOR DE	BTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attor compensation paid to me within one year before the filing of the petition in bankruptcy be rendered on behalf of the debtor(s) in contemplation of or in connection with the ba	y, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept	\$ <u></u>	3,500.00
	Prior to the filing of this statement I have received		1,750.00
	Balance Due	\$	1,750.00
2.	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
3.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
4.	■ I have not agreed to share the above-disclosed compensation with any other person	n unless they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons copy of the agreement, together with a list of the names of the people sharing in the	who are not members e compensation is atta	or associates of my law firm. A ched.
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspec	cts of the bankruptcy c	ase, including:
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in debtor. Preparation and filing of any petition, schedules, statement of affairs and plan whice. Representation of the debtor at the meeting of creditors and confirmation hearing, ad. [Other provisions as needed] \$1,750.00 is limited to pre-petition services. Debtor has agreed to services including (i) collecting, reviewing and providing standard meeting; (ii) receiving reviewing and replying to standard correspondient regarding a debtor's obligations, phone calls, emails and contrastee meeting regarding standard issues; (iv) attendance at one processing of reaffirmation agreements for automobiles; (vi) photoservices. 	th may be required; and any adjourned hear o pay the sum of \$1 d documents to Cas condence regarding orrespondence with e creditors' meeting	rings thereof; ,750.00 for post-petition se Trustee prior to first the case; (iii) counseling client prior to the first with Trustee; (v) standard
6.	By agreement with the debtor(s), the above-disclosed fee does not include the followin which are billable at \$400.00 for all attorneys, amendments, exam Trustee's Office, attendance at adjourned hearings, prosecution of to, judicial lien avoidance, relief from stay or dismissal motions of disbursements for on-line research services), negotiations with sematters beyond the scope of a simple bankruptcy case.	inations, or informations or defense of motions adversary procee	ns, including but not limited dings, legal research (plus

In re	Michael T Capalbo Barbara Capalbo	Case No.		
	Γ	Debtor(s)		
	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S) (Continuation Sheet)			
		CERTIFICATION		
	certify that the foregoing is a complete statem nkruptcy proceeding.	nent of any agreement or arrangement for payment to me for representation of the debtor(s) in		
Jai	nuary 8, 2020	/s/ Paul Hollender		
Dat	te	Paul Hollender		
		Signature of Attorney		

1200 South Avenue Suite 201 Staten Island, NY 10314 718-442-4424 Fax: 718-273-4847

Corash & Hollender

info@silawfirm.com

Name of law firm

United States Bankruptcy Court Eastern District of New York

In re	Michael T Capalbo Barbara Capalbo		Case No.	
		Debtor(s)	Chapter	7
	<u>VERI</u>	IFICATION OF CREDITOR N	<u>MATRIX</u>	
credito	The above named debtor(s) ors) is true and correct to the	or attorney for the debtor(s) hereby vebest of their knowledge.	erify that the	attached matrix (list of
Date:				
		Michael T Capalbo		
		Signature of Debtor		
Date:				
		Barbara Capalbo		

Signature of Debtor

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American Express PO Box 1270 Newark, NJ 07101-1270

American Express PO Box 1270 Newark, NJ 07101-1270

Bank of America PO Box 17234 Wilmington, DE 19850

Barclay Card Services PO Box 8833 Wilmington, DE 19899-8833

Bergdorf Goodman PO Box 5235 Carol Stream, IL 60197

Best Buy Credit Services PO Box 9001007 Louisville, KY 40290

Bloomingdale's PO Box 78008 Phoenix, AZ 85062

Bloomingdale's PO Box 78008 Phoenix, AZ 85062

Bloomingdale's PO Box 78008 Phoenix, AZ 85062

Capital One PO Box 6492 Carol Stream, IL 60197-6492

Capital One PO Box 6492 Carol Stream, IL 60197-6492 Capital One PO Box 6492 Carol Stream, IL 60197-6492

Capital One PO Box 6492 Carol Stream, IL 60197-6492

Capital One PO Box 6492 Carol Stream, IL 60197-6492

Capital One/Neiman Marcus PO Box 5235 Carol Stream, IL 60197

Capital One/Neiman Marcus PO Box 5235 Carol Stream, IL 60197

Capital One/Walmart PO Box 4069 Carol Stream, IL 60197

Cardmember Service/Disney PO Box 1423 Charlotte, NC 28201

Cardmember Service/Disney PO Box 1423 Charlotte, NC 28201

Citi Cards PO Box 70166 Philadelphia, PA 19176

Citi Cards PO Box 70166 Philadelphia, PA 19176

Comenity - BJ's PO Box 659834 San Antonio, TX 78265-9134 Comenity Bank/Lucky Brand PO Box 659622 San Antonio, TX 78265

Comenity Bank/Sephora PO Box 659820 San Antonio, TX 78265

Comenity/BedBath&Beyond PO Box 659834 San Antonio, TX 78265

Comenity/Williams Sonoma PO Box 659705 San Antonio, TX 78265

Credit One Bank PO Box 60500 City of Industry, CA 91716

Discover Financial Svcs PO Box 71084 Charlotte, NC 28272-1084

Discover Financial Svcs PO Box 71084 Charlotte, NC 28272-1084

Home Depot Credit Svcs PO Box 9001010 Louisville, KY 40290-1010

Home Depot Credit Svcs PO Box 9001010 Louisville, KY 40290-1010

HSBC Bank USA NA PO Box 4657 Carol Stream, IL 60197

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346 Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Merrick Bank PO Box 660702 Dallas, TX 75266-0702

Midland Credit Management PO Box 301030 Los Angeles, CA 90030

Mission Lane PO Box 4517 Carol Stream, IL 60197

Nationwide Credit Inc PO Box 14581 Des Moines, IA 50306

Nordstrom PO Box 79139 Phoenix, AZ 85062

Nordstrom PO Box 79137 Phoenix, AZ 85062

Ollo Card Services PO Box 660371 Dallas, TX 75266

ReadyRefresh by Nestle #216 6661 Dixie Hwy, Suite 4 Louisville, KY 40258

Saks Fifth Avenue PO Box 71106 Charlotte, NC 28272

Sears Credit Cards PO Box 9001055 Louisville, KY 40290-1055 Shop Your Way Mastercard PO Box 9001104 Louisville, KY 40290-1104

Synchrony Bank/Amazon PO Box 960013 Orlando, FL 32896-0013

Synchrony Bank/HSN PO Box 530905 Atlanta, GA 30353

Synchrony Bank/JCP PO Box 960090 Orlando, FL 32896-0090

Synchrony Bank/Lowe's PO Box 530914 Atlanta, GA 30353

Synchrony Bank/Lowe's PO Box 530914 Atlanta, GA 30353

Synchrony Bank/QCard PO Box 530905 Atlanta, GA 30353

Synchrony Bank/QVC Attn Bankruptcy Dept PO Box 965060 Orlando, FL 32896

TD Bank NA PO Box 100290 Columbia, SC 29202-3290

Volkswagen Credit PO Box 5215 Carol Stream, IL 60197

Volkswagen Credit PO Box 5215 Carol Stream, IL 60197

Wells Fargo Home Mortgage P O Box 105632 Atlanta, GA 30348

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL **BANKRUPTCY RULE 1073-2(b)**

Michael T Capalbo

DEBTOR(S):	Barbara Capalbo	CASE NO.:
	Local Bankruptcy Rule 1073-2(b), t Cases, to the petitioner's best knowle	ne debtor (or any other petitioner) hereby makes the following disclosure dge, information and belief:
was pending at any t spouses or ex-spouse partnership and one have, or within 180 (time within eight years before the fili es; (iii) are affiliates, as defined in 11 or more of its general partners; (vi) a	oses of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case and of the new petition, and the debtors in such cases: (i) are the same; (ii) are U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a repartnerships which share one or more common general partners; or (vii) of the Related Cases had, an interest in property that was or is included in the
■ NO RELATED (CASE IS PENDING OR HAS BEEN	PENDING AT ANY TIME.
☐ THE FOLLOWI	NG RELATED CASE(S) IS PENDI	NG OR HAS BEEN PENDING:
1. CASE NO.:	JUDGE: DISTRICT/DIV	ISION:
CASE STILL PEND	DING (Y/N): [<i>If</i>	closed] Date of closing:
CURRENT STATU	JS OF RELATED CASE:	Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNED IN WHI		
	•	to NOTE above):
	LISTED IN DEBTOR'S SCHEDUL F RELATED CASE:	E "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRICT/DIV	ISION:
CASE STILL PEND	DING (Y/N): [<i>If</i>	closed] Date of closing:
CURRENT STATU	JS OF RELATED CASE:	Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHI	CH CASES ARE RELATED (Refer	to NOTE above):
	LISTED IN DEBTOR'S SCHEDUL F RELATED CASE:	E "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRICT/DIV	ISION:
CASE STILL PEND	DING (Y/N): [<i>If</i>	closed] Date of closing:

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer	
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE SCHEDULE "A" OF RELATED CASE:	E "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
	Is who have had prior cases dismissed within the preceding 180 days may not ired to file a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S A	TTORNEY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New Y	York (Y/N):Y
CERTIFICATION (to be signed by pro se debtor/petition I certify under penalty of perjury that the within bankrupt as indicated elsewhere on this form. /s/ Paul Hollender	ner or debtor/petitioner's attorney, as applicable): tcy case is not related to any case now pending or pending at any time, except
Paul Hollender Signature of Debtor's Attorney Corash & Hollender 1200 South Avenue	Signature of Pro Se Debtor/Petitioner
Suite 201 Staten Island, NY 10314 718-442-4424 Fax:718-273-4847	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009